



## **Department of Navy (DON) Surveillance Advisory: Middle East Respiratory Syndrome Coronavirus (MERS CoV) 12 June 2013**

### **Issue**

- As of 7 June 2013, 55 laboratory confirmed cases of MERS-CoV, including 31 deaths, have been reported by the World Health Organization (WHO).
- All cases have been identified in or linked to four countries in the Arabian Peninsula and there is no evidence of extended person to person transmission.
- No special screenings at points of entry or travel restrictions are recommended by the WHO or the US Centers for Disease Control and Prevention (CDC).
- The National Center for Medical Intelligence (NCMI) reports no increased risk to US personnel. The Armed Forces Health Surveillance Center (AFHSC) is monitoring the situation and no cases have been identified in the United States or in the DoD population.
- NMCPHC medical surveillance strategy includes central analysis of electronic clinical data, local ESSENCE monitoring, Fleet Disease and Injury Reporting, and reporting of suspect and confirmed cases of unusual conditions and clusters via Disease Reporting System internet (DRSi).

### **Background**

In September of 2012, the WHO released a Global Alert and Response update related to isolation of a novel strain of Severe Acute Respiratory Syndrome (SARS) like coronavirus from two previously healthy males with acute respiratory distress and pulmonary inflammation and a history of travel to Saudi Arabia. By 23 May 2013, 44 cases had been identified, including 22 deaths, all within the Middle East or with some connection to the Middle East. The virus was designated the Middle East Respiratory Syndrome Coronavirus (MERS-CoV) and recognized by the WHO as a significant public health risk. On 29 May 2013, the US Department of Health and Human Services determined that MERS-CoV poses a significant potential for a public health emergency and the Food and Drug Administration has recently authorized emergency use of diagnostics for MERS-CoV detection.

To date, MERS-CoV cases have been identified in Jordan, Qatar, Saudi Arabia and the United Arab Emirates. Additional cases identified in France, Germany, Italy, Tunisia and the United Kingdom have consisted of individuals who were transferred for care from or had recent travel to the Middle East or were close contacts of these cases. A large proportion of laboratory confirmed cases of MERS-CoV have been among individuals with previously existing comorbidities. Multiple close-contact clusters have been observed including healthcare related outbreaks. It remains unknown what the reservoir of the virus is, how sporadic infections are acquired and how the virus spreads from person to person. The clinical spectrum and incubation period are also unknown at this time.

### **NMCPHC Surveillance and Reporting Guidance and MERS-CoV Resources**

- If you suspect a case, immediately notify your Public Health Emergency Officer and your cognizant NEPMU. CDC provides case definitions for surveillance and reporting at <http://www.cdc.gov/coronavirus/mers/case-def.html#case>.



- Navy and Marine Corps units providing patient care should report probable or confirmed MERS-CoV cases via DRSi using the category 'Any other unusual condition'.
  - Include clinical presentation, travel history, hospital admission status/dates and information about contacts with other suspect cases.
  - For further information on reporting Medical Events, [click here](#) or contact the NDRS helpdesk at [NDRS@nmcphe.med.navy.mil](mailto:NDRS@nmcphe.med.navy.mil), COMM: 757-953-0954, DSN: 377-0954.
- Syndromic surveillance activities play an integral part in NMCPHC's surveillance and preparedness strategy. Navy MTFs should review their surveillance protocols to ensure they include routine ESSENCE monitoring.
- CDC MERS-CoV resources can be found at <http://www.cdc.gov/coronavirus/> and include infection control recommendations for health care settings as well as a travel notice recommending that travelers to countries in the Middle East seek medical care if they experience symptoms of lower respiratory illness.
- For more information on the cases including interim surveillance recommendations, see: [http://www.who.int/csr/disease/coronavirus\\_infections/en/](http://www.who.int/csr/disease/coronavirus_infections/en/).
- Contact your cognizant [NEPMU](#) if you have any questions. NEPMU staff can assist with investigation support, risk assessment and obtaining guidance on laboratory testing.